

Name of Person Filing Document: _____
Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing: ☐ Self (Without a Lawyer) or ☐ Attorney for _____

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

In the matter of the Guardianship of: _____

Case Number PB: _____

**ORDER APPOINTING ATTORNEY,
PHYSICIAN, AND COURT INVESTIGATOR
FOR GUARDIAN FOR AN ADULT**

(Incapacitated Person)

1. **SCHEDULED HEARING:** A sworn "*Petition for Appointment of a Guardian*" was filed and this court has scheduled a hearing to determine the merits of the Petition as follows:

DATE AND TIME: _____
LOCATION: _____
JUDICIAL OFFICER: _____

2. **ATTORNEY APPOINTMENT:** An attorney is appointed to represent the person by appearing at the hearing. Counsel shall adhere to the Court's Guidelines for Appointed Counsel:

NAME: _____ TELEPHONE: _____
ADDRESS: _____

3. **PHYSICIAN APPOINTMENT AND REPORT:** The physician who shall examine the proposed ward and prepare a written report about the condition of the person about whom the Petition was filed is:

NAME: _____ TELEPHONE: _____
ADDRESS: _____

4. **COURT INVESTIGATOR:** An investigator from the court shall visit the proposed ward and submit a written report to the Clerk of the Court, Probate Registrar at least ten business days before the hearing date and shall give a copy of the report to the Petitioner or his or her attorney and to the attorney for the proposed ward.

5. **OTHER ORDERS TO PETITIONER:**

- A. **COURT PAPERS FOR THE APPOINTED LAWYER:** Petitioner must within **24 HOURS** from the date of this Order mail or deliver to the attorney for the incapacitated person named in paragraph 2 copies of *the "Petition for Permanent Appointment"* and all related court paperwork, any physicians' reports in his or her possession, and any Orders of the court.
- B. **PHYSICIAN REPORT:** Petitioner must, **NO LATER THAN 10 BUSINESS DAYS BEFORE THE HEARING** file the original of the physician's report with the Clerk of the Court, Probate Registrar, AND mail or hand-deliver a copy of the report to the attorney named in paragraph 2 AND to the offices of the judicial officer named in Paragraph 1, AND to the Court Investigator, 125 West Washington, Phoenix, Arizona 85003.

DONE IN OPEN COURT: _____

JUDGE/COMMISSIONER